| PATENT APPLICATIO | N FEE DETERM ive October 1, 20 | IINATIOI 001 | N RECOR | D | PD | 10/ l | N6 | | |
|---|-----------------------------------|---|--------------------------|---------------|-------------------|------------------------|-------------------------------|------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | SMAI | L ENT | | OTHER THAN OR SMALL ENTITY | | |
| OTAL CLAIMS | 16 | | | RA | | FEE | Ŀ | RATE | FEE |
| OR | NUMBER FILED | NUMBE | NUMBER EXTRA | | CFEE | 370.00 | OR | BASIC FEE | 740.00 |
| OTAL CHARGEABLE CLAIMS | /6 minus 20= | . 6 | | X\$ | 9= | | OR | X\$18= | |
| PENDENT CLAIMS 3 minus 3 = | | | | X42= | | | OR | X84= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | +1 | 40= | | OR | +280= | |
| If the difference in column 1 is less than zero, enter "0" in column 2 | | | | TO | TAL | | OR | TOTAL | 740 |
| CLAIMS AS | AMENDED - PAI | RT II | (Column 3) | SN | IALL E | NTITY | OR | OTHER | |
| (Column 1) CLAIMS REMAINING AFTER | HIC NU PRE | SHEST IMBER VIOUSLY ID FOR | PRESENT EXTRA | R | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| REMAINING AFTER AMENDMENT Total + // Independent • // FURCY DESCRIPTION OF | Minus ** | 20 | | × | \$ 9= | | OR | X\$18= | |
| Independent • # | Minus *** | 3 | | X | 42= | | OR | X84= | 8400 |
| FIRST PRESENTATION OF | MULTIPLE DEPENDE | NT CLAIM | | 1 | 140= | | OR | +280= | |
| (Column 1 CLAIMS REMAINING AFTER | S N | DIUMN 2) IGHEST IUMBER EVIOUSLY AID FOR | (Column 3) PRESENT EXTRA | 1 | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AFTER AMENDMEN Total • / / / / / / / / / / / / / / / / / / | Minus 2 | <u>(0)</u> | n | 115 | (\$ 9= | M_{\perp} | OF | X\$18= | |
| Independent + | Minus · *** | 4 | - | | X42= | | Øf | X84= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | 140= | | OF | +280= | |
| | | | | AD | TOTAL OIT. FEE | | OF | ADDIT. FI | |
| Column (Column | */ | column 2) HIGHEST | (Column 3 | " — | | T ADDI- | 7 | | ADDI- |
| CLAIMS REMAININ AFTER AMENOME Total Independent Independent | IG PF | NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | TIONA FEE | | RATE | 2 |
| Total . 13 | Minus ** | الار | • / | \mathcal{L} | X\$ 9= | 1 | | R X\$18 | = |
| Independent | eniM | | 1-/ | 45 | X42= | | _]o | R X84 | |
| FIRST PRESENTATION O | F MULTIPLE DEPEN | DENT CLA | <u> </u> | - | +140= | 1 | \log | +280 | = |
| If the entry in column 1 is less to If the "Highest Number Previou If the "Highest Number Previous The "Highest Number Previous | | | | 20. AI | TOTA OOIT, FE | Ε | 了% | R ADDIT. F | |
| | | | | 0.40 | | domade Offic | e, U.S. | DEPARTMEN | IT OF COMME |